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## FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

101	For Other Trian An Authorized Committee			Office Use Only	
1. NAME OF COMMITTEE (in full)	E OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	·	
DENALI LEADERSHIP PAC					
				لتختصب	
ADDRESS (number and street)	6158 ES	EX PARK D	RIVE		
Check if different		<del></del>			
than previously reported. (ACC)	MCHORAG	<u> </u>	AK 1995	516 - L	
2. FEC IDENTIFICATION NUMBER	ER ▼ CITY	<b>A</b>	STATE A	ZIP CODE A	
C 00438291	3. IS RE	THIS NEW PORT (N) O	AMENDED (A)		
4. TYPE OF REPORT (to (Choose One)	Report : Due On: :	0 (M2) May 20 (M		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)	
(a) Quarterly Reports:	. :. . ·	0 (M3)		(Non-Election Year Only)	
April 15 Quarterly Report (Q1)		0 (M4) Jul 20 (M	7) Oct 20 (M10)	Jan 31 (YE)	
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election	Primary (12P).	General (12G)	Runoff (12R)	
October 15	Report for the:	Convention (12C)	Special (12S)		
Quarterly Report (Q3)  January 31  Year-End Report (YE)	Election	on		in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election	on ;		in the State of	
5. Covering Period	01 2008	through	3 31 20	58.	
I certify that I have examined this Re	anort and to the best of	ny knowledge and heliaf it is	true correct and comple	ate .	
Type or Print Name of Treasurer	MARY C	S GORE			
Signature of Treasurer  Date 10 14 2008					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.					
Office Use Only			1 h	C FORM 3X Rev. 12/2004	